

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Blue PA PAC		FEC IDENTIFICATION NUMBER ▼ C C00824656	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Canal Partners Media		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2022	
Mailing Address 900 Circle 75 Pkwy SE		Amount 125000.00	
City Atlanta	State GA	Zip Code 30339-3035	Transaction ID : 500027256
Purpose of Expenditure Media Buy; IE-Only Account		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 11 / 02 / 2022
Name of Federal Candidate OZ, MEHMET, DR, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 550055.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Canal Partners Media		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2022	
Mailing Address 900 Circle 75 Pkwy SE		Amount 125000.00	
City Atlanta	State GA	Zip Code 30339-3035	Transaction ID : 500027257
Purpose of Expenditure Media Buy; IE-Only Account		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 11 / 02 / 2022
Name of Federal Candidate FETTERMAN, JOHN, KARL, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 550055.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	250000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	250000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MOSKOWITZ, SARA, , ,

[Electronically Filed]

Date

MM / DD / YYYY
11 / 03 / 2022

Signature